

Under the Paperwork Reduction Act of 1995, no persons are required to respond to collection of information unless it contains a valid OMB control number.

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		Attorney Docket Number	149459.00003	
		First Named Inventor	CLAUS HARDER	
		<i>COMPLETE IF KNOWN</i>		
		Application Number	TBA	
<input checked="" type="checkbox"/> Declaration Submitted With Initial Filing	<b>OR</b>	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e) required)	Filing Date	July 11, 1006
			Art Unit	TBA
			Examiner Name	TBA

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**IMPLANT FOR RELEASING AN ACTIVE SUBSTANCE INTO A VESSEL THROUGH WHICH A BODY  
MEDIUM FLOWS**

(Title of the invention)

the specification of which

☐ is attached hereto

**OR**



02/04/2005

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

PCT/EP2005/001167

and was amended on ((MM/DD/YYYY)

07/11/2006

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed		Certified Copy Attached?	
					YES	NO
10 2004 006 745.7	DE	02/06/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 2004 029 611.1	DE	06/09/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance completing the form, call 1-800-PTO-9199 and select option 2.

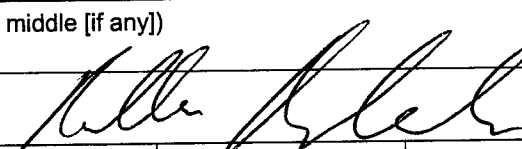
Under the Paperwork Reduction Act of 1995, no persons are required to respond to collection of information unless it contains a valid OMB control number.

## DECLARATION – Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		The address associated with Customer Number: <span style="border: 1px solid black; padding: 2px 20px;">25207</span>		OR <input type="checkbox"/> Correspondence address below	
Name <b>POWELL GOLDSTEIN LLP</b>					
Address <b>ONE ATLANTIC CENTER, 14<sup>TH</sup> FLOOR 1201 W. PEACHTREE STREET, NW</b>					
City <b>ATLANTA</b>		State <b>GEORGIA</b>		ZIP <b>30309</b>	
Country <b>UNITED STATES</b>		Telephone <b>404-572-6900</b>		Email <b>jbernstein@pogolaw.com</b>	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <b>CLAUS</b>			Family Name or Surname <b>HARDER</b>		
Inventor's Signature <i>Claus Harder</i>			Date <i>June 8, 2006</i>		
Residence: City <b>Uttenreuth</b>		State		Country <b>Germany</b>	
				Citizenship <b>German</b>	
Mailing Address <b>Memelstraße 7</b>					
City <b>Uttenreuth</b>		State		Zip <b>91080</b>	
				Country <b>Germany</b>	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) <b>ROLAND</b>			Family Name or Surname <b>ROHDE</b>		
Inventor's Signature			Date		
Residence: City <b>Burgdorf</b>		State		Country <b>Germany</b>	
				Citizenship <b>German</b>	
Mailing Address <b>Flaatmoor 4</b>					
City <b>Burgdorf</b>		State		Zip <b>31303</b>	
				Country <b>Germany</b>	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being required on the <u>3</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

Under the Paperwork Reduction Act of 1995, no persons are required to respond to collection of information unless it contains a valid OMB control number.

## DECLARATION – Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/>		The address associated with Customer Number: <span style="border: 1px solid black; padding: 2px 10px;">25207</span>		OR <input type="checkbox"/> Correspondence address below	
Name <b>POWELL GOLDSTEIN LLP</b>					
Address <b>ONE ATLANTIC CENTER, 14<sup>TH</sup> FLOOR 1201 W. PEACHTREE STREET, NW</b>					
City <b>ATLANTA</b>		State <b>GEORGIA</b>		ZIP <b>30309</b>	
Country <b>UNITED STATES</b>		Telephone <b>404-572-6900</b>		Email <b>jbernstein@pogolaw.com</b>	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
<b>NAME OF SOLE OR FIRST INVENTOR:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>CLAUS</b>				Family Name or Surname <b>HARDER</b>	
Inventor's Signature					Date
Residence: City <b>Uttentreuth</b>		State		Country <b>Germany</b>	Citizenship <b>German</b>
Mailing Address <b>Memelstraße 7</b>					
City <b>Uttentreuth</b>		State		Zip <b>91080</b>	Country <b>Germany</b>
<b>NAME OF SECOND INVENTOR:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>ROLAND</b>				Family Name or Surname <b>ROHDE</b>	
Inventor's Signature 					Date <b>June 15, 2006</b>
Residence: City <b>Burgdorf</b>		State		Country <b>Germany</b>	Citizenship <b>German</b>
Mailing Address <b>Flaatmoor 4</b>					
City <b>Burgdorf</b>		State		Zip <b>31303</b>	Country <b>Germany</b>
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being required on the <u>3</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
BERND		HEUBLEIN (DECEASED)	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
ERHARD		FLACH	
Inventor's Signature <i>Erhard Flach</i>			Date <i>June 08, 2006</i>
Berlin	State	Germany	German
Residence: City	State	Country	Citizenship
Krusauer Straße 20a			
Mailing Address			
Berlin	State	12305	Germany
City	State	Zip	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
WOLFGANG		GEISTERT	
Inventor's Signature <i>Wolfgang Geistert</i>			Date <i>June 8, 2006</i>
Rheinfelden	State	Germany	German
Residence: City	State	Country	Citizenship
Rheinstraße 7			
Mailing Address			
Rheinfelden	State	79618	Germany
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet	Page <u>2</u> of <u>2</u>
--------------------	---	---------------------------

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
GERNOT		KOLBERG	
Inventor's Signature		Date	
<i>Gernot Kolbe</i>		June 8, 2006	
Berlin	State	Germany	German
Residence: City		Country	Citizenship
Karl-Marx-Straße 37			
Mailing Address			
Berlin	State	12043	Germany
City		Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

# DECLARATION Supplemental Sheet

## For Legal Representatives (35 U.S.C. 117) On Behalf of A Deceased or Incapacitated Inventor

Enter Deceased or Incapacitated Inventor's Name BERND HEUBLEIN Page 1 of 1

<b>Name of Legal Representative:</b>		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Eva		Heublein	
Legal Representative's Signature <i>Eva Heublein</i>		Date <i>18<sup>th</sup> June 2006</i>	
Residence: City Hannover	State	Country Germany	Citizenship German
Mailing Address Albrechtstrasse 2			
Mailing Address			
City Hannover	State	Zip 30627	Country Germany
<b>Name of Additional Legal Representative, if any:</b>		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Nora		Heublein	
Legal Representative's Signature <i>Nora Heublein</i>		Date <i>17<sup>th</sup> June 2006</i>	
Residence: City Köln	State	Country Germany	Citizenship German
Mailing Address Ostlandstrasse 50			
Mailing Address			
City Köln	State	Zip 50858	Country Germany
<b>Name of Additional Legal Representative, if any:</b>		<input type="checkbox"/> A petition has been filed for this non-signing legal representative	
Given Name (first and middle (if any))		Family Name or Surname	
Christoph		Heublein	
Legal Representative's Signature <i>Christoph Heublein</i>		Date <i>21<sup>st</sup> June 2006</i>	
Residence: City Hannover	State	Country Germany	Citizenship German
Mailing Address Albrechtstraße 2			
Mailing Address			
City Hannover	State	Zip 30627	Country Germany

This collection of information is required by 35 U.S.C. 117 and 37 CFR 1.42, 1.43, 1.63 and 1.64(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.